

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT** ▼Example: If typing, type
over the lines

LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

ADDRESS (number and street)

103 POWELL COURT SUITE 200

☐Check if different
than previously
reported. (ACC)

BRENTWOOD

TN

37027

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00347955

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☒

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

03

01

2009

through

03

31

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Penny Brake

Signature of Treasurer

Electronically Filed by Penny Brake

Date

04

14

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2009		9929.54
(b) Cash on Hand at Beginning of Reporting Period	8596.15	
(c) Total Receipts (from Line 19)	20402.00	32202.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	28998.15	42131.54
7. Total Disbursements (from Line 31)	1018.50	14151.89
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	27979.65	27979.65
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	19852.00	31652.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	550.00	550.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	20402.00	32202.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➡	20402.00	32202.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	20402.00	32202.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	20402.00	32202.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	18.50	51.89
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	18.50	51.89
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	14000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	100.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1018.50	14151.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1018.50	14151.89

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	20402.00	32202.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20402.00	32202.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	18.50	51.89
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	18.50	51.89

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 14

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

A.

Full Name (Last, First, Middle Initial)

Karen Bowling

Mailing Address 127 Orlando Street

City

Beckley

State

WV

Zip Code

25801

FEC ID number of contributing
federal political committee.

C

Name of Employer
Raleigh General Hospital

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7093

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Penny Brake

Mailing Address 1809 Mt. Zion Rd

City

Ashland City

State

TN

Zip Code

37015

FEC ID number of contributing
federal political committee.

C

Name of Employer
LifePoint Hospitals, Inc.

Occupation
VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7084

Amount of Each Receipt this Period

650.00

C.

Full Name (Last, First, Middle Initial)

Margie Brusseau

Mailing Address 1030 Cedar Springs Road

City

Athens

State

TN

Zip Code

37303

FEC ID number of contributing
federal political committee.

C

Name of Employer
Athens Regional Med. Ctr.

Occupation
RN, CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7071

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

A.

Full Name (Last, First, Middle Initial)

Thomas H. Butler

Mailing Address 4717 Potomac Lane

City

Brentwood

State

TN

Zip Code

37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
LifePoint Hospitals, Inc.

Occupation
Healthcare

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1755.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7068

Amount of Each Receipt this Period

1755.00

B.

Full Name (Last, First, Middle Initial)

Michael Clark

Mailing Address 101 Gillespie Dr

City

Franklin

State

TN

Zip Code

37067

FEC ID number of contributing
federal political committee.

C

Name of Employer
LifePoint Hospitals

Occupation
American Division CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7095

Amount of Each Receipt this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

John Cude

Mailing Address 1449 Charleston Lane

City

Columbia

State

TN

Zip Code

38401

FEC ID number of contributing
federal political committee.

C

Name of Employer
LifePoint Hospitals, Inc.

Occupation
Director of Reimbursement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7080

Amount of Each Receipt this Period

327.00

SUBTOTAL of Receipts This Page (optional)

4082.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

A.

Full Name (Last, First, Middle Initial)

Charlotte Dupre

Mailing Address 2148 Augusta St

City

La Place

State

LA

Zip Code

70068

FEC ID number of contributing
federal political committee.

C

Name of Employer
River Parishes Hospital

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7075

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Judy Fann

Mailing Address 4542 Baton Rouge Dr

City

Hermitage

State

TN

Zip Code

37076

FEC ID number of contributing
federal political committee.

C

Name of Employer
LifePoint Hospitals

Occupation
Corporate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7090

Amount of Each Receipt this Period

295.00

C.

Full Name (Last, First, Middle Initial)

Susan K. Goetzinger

Mailing Address 4220 Windsong Drive

City

Riverton

State

WY

Zip Code

82501

FEC ID number of contributing
federal political committee.

C

Name of Employer
Riverton

Occupation
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7085

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)

2045.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

A.

Full Name (Last, First, Middle Initial)

David Ingram

Mailing Address 811 Otter Creek Rd

City

Nashville

State

TN

Zip Code

37220

FEC ID number of contributing
federal political committee.

C

Name of Employer
LifePoint Hospitals

Occupation

Director, Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7066

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Candace Johnson

Mailing Address 30 Durrett Road

City

Leoma

State

TN

Zip Code

38468

FEC ID number of contributing
federal political committee.

C

Name of Employer
Crockett Hospital

Occupation

CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7088

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)

Chad Labrum

Mailing Address 398 S. 3130 W.

City

Vernal

State

UT

Zip Code

84078

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ashley Regional

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7077

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

A.

Full Name (Last, First, Middle Initial)

Ruth McDaniel

Mailing Address 1305 Autumn Springs Lane

City

Old Hickory

State

TN

Zip Code

37138

FEC ID number of contributing
federal political committee.

C

Name of Employer
Valley View

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7079

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Michael J. Meadows

Mailing Address 4712 E 250 S

City

Knox

State

IN

Zip Code

46534

FEC ID number of contributing
federal political committee.

C

Name of Employer
Starke Memorial Hospital

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7091

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Brad Owens

Mailing Address 1014 Crimson Clover Drive

City

Brentwood

State

TN

Zip Code

37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
LifePoint Hospitals, Inc.

Occupation
Division CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7070

Amount of Each Receipt this Period

1875.00

SUBTOTAL of Receipts This Page (optional)

3375.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 11 / 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

A.

Full Name (Last, First, Middle Initial)

Ira Lee Perry, III

Mailing Address 510 Hampton Heights Lane

City

Franklin

State

TN

Zip Code

37064

FEC ID number of contributing
federal political committee.

C

Name of Employer
LifePoint Hospitals, Inc.

Occupation

Corp Dir Mat. Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7089

Amount of Each Receipt this Period

325.00

B.

Full Name (Last, First, Middle Initial)

Thomas Pezanosky, Jr.

Mailing Address 1192 McCoury Lane

City

Spring Hill

State

TN

Zip Code

37174

FEC ID number of contributing
federal political committee.

C

Name of Employer
LifePoint Hospitals, Inc.

Occupation

Reimbursement Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7078

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Mark Poppell

Mailing Address 1615 Championship Blvd

City

Franklin

State

TN

Zip Code

37064

FEC ID number of contributing
federal political committee.

C

Name of Employer
LifePoint Hospitals, Inc.

Occupation

VP Reimbursement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7069

Amount of Each Receipt this Period

760.00

SUBTOTAL of Receipts This Page (optional)

1385.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

A.

Full Name (Last, First, Middle Initial)

Scott Raplee

Mailing Address 231 Lancelot Lane

City

Franklin

State

TN

Zip Code

37064

FEC ID number of contributing
federal political committee.

C

Name of Employer
LifePoint Hospitals, Inc.

Occupation

President, Group Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7072

Amount of Each Receipt this Period

3000.00

B.

Full Name (Last, First, Middle Initial)

Jason Schmiedt

Mailing Address 713 Sherbrooke Ct

City

Nashville

State

TN

Zip Code

37211

FEC ID number of contributing
federal political committee.

C

Name of Employer
LifePoint Hospitals

Occupation

Reimb. Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7067

Amount of Each Receipt this Period

215.00

C.

Full Name (Last, First, Middle Initial)

Catherine Sekula

Mailing Address 24 Deer Valley

City

Lunden

State

WY

Zip Code

82520

FEC ID number of contributing
federal political committee.

C

Name of Employer
Riverton

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7087

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)

3965.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

A.

Full Name (Last, First, Middle Initial)

Michael Sherrod

Mailing Address 185 Hospital Road

City

Winchester

State

TN

Zip Code

37398

FEC ID number of contributing
federal political committee.

C

Name of Employer
Southern Tennessee Medical
Center

Occupation

Assistant Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7076

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

James Smolik

Mailing Address 4242 Valley Green Circle

City

Riverton

State

WY

Zip Code

82501

FEC ID number of contributing
federal political committee.

C

Name of Employer
Riverton Memorial Hospital

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7086

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

19852.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

A.

Full Name (Last, First, Middle Initial)

CHARLIE JR. MELANCON

Mailing Address PO Box 549
PO BOX 549

City Napoleonville State LA Zip Code 70390

Purpose of Disbursement
fundraiser

Candidate Name
CHARLIE JR. MELANCON

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: LA District: 03

Transaction ID: SB23.7097

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

SCALISE FOR CONGRESS 08

Mailing Address 3100 Ridgelake
Suite 301

City Metairie State LA Zip Code 70002

Purpose of Disbursement
fundraiser

Candidate Name
SCALISE FOR CONGRESS 08

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: LA District: 01

Transaction ID: SB23.7098

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

1000.00